

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000060538

Entity Name: CLERMONT PSYCHOLOGICAL SERVICES, LLC

Current Principal Place of Business:

1208 BOWMAN STREET
CLERMONT, FL 34711

Current Mailing Address:

1208 BOWMAN STREET
CLERMONT, FL 34711 US

FEI Number: 83-3951306

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAPPS, BILLY R
13022 SHORT LEAF CT.
CLERMONT, FL 34711 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title CEO
Name CAPPS, CINDY B DR.
Address 13022 SHORT LEAF CT.
City-State-Zip: CLERMONT FL 34711

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CINDY CAPPS

CEO

04/25/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date